## P13000029647

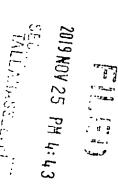
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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November 8, 2019

MIGUEL A MARTINEZ 19901 SW 92 AVE CUTLER BAY, FL 33157

SUBJECT: ANGEL WOOD FLOORS, CORP.

Ref. Number: P13000029647

We have received your document for ANGEL WOOD FLOORS, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a NOT FOR PROFIT CORPORATION, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 119A00023129

www.sunbiz.org

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ANGEL WOOD F	LOORS, CORP.	
	BER: P13000029647		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	MIGUEL A MARTINEZ	-	
	TA	Name of Contact Person	1
		Firm/ Company	
	19901 SW 92 AVE		
		Address	
	CUTLER BAY, FL 33157		
		City/ State and Zip Cod	e
ZEN	JAIDASOSA56@YAHOO.CO	)M	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
MIGUEL A MART	NEZ	at (	246-0751
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee
Tal	lahassee, FL 32314	2415 N	N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

ANGEL WOOD FLOORS, CORP

(Name of Corporation as cur	rently filed with the Florid	ia Dept. of State)		
P13000029647				
(Document Num	ber of Corporation (if know	n)		
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corpora	ation adopts the fol	lowing amend	iment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>			
				iew
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corpora			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				_
(Frincipal office dualities <u>proof the ASTREET ANDRESS</u> )				<b>.</b>
			- 전환 <b>18</b>	5
C. Enter new mailing address, if applicable:			- A-1	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<del></del>	<del>- ; - `</del> ;	
			- S I	2 ; ;
				ب ماند المساحة ==
	<del></del>	<u> </u>	- <u>rn</u> - <del>F</del>	=
D. If amending the registered agent and/or registered office	address in Florida, enter	the name of the	. د	S
new registered agent and/or the new registered office add	dress:			
Name of New Registered Agent				
(Flori	da street address)	<u> </u>		
New Registered Office Address:		. Florida		
He Registered Office Hadress.	(City)	, rionda	(Zip Code)	_
New Registered Agent's Signature, if changing Registered A	gent:			
I hereby accept the appointment as registered agent. I am fami	liar with and accept the obl	ligations of the posi	tion.	
Signature of N	ew Registered Agent, if cha	neine	<del></del>	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	v	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	sv	RAMON A MARTINEZ	3761 SW 29 ST	
Add		· · · · · · · · · · · · · · · · · · ·	MIAMI, FL 33134	
X Remove				
2) Change	sv	MIGUEL A TORRES BATISTA	14511 SW 293 TERRA	
Add			HOMESTEAD, FL 33033	
X Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			<del></del>	
Remove				
6) Change				
Add				
Remove				
		Page 2 of 4		
E. If amending or addir (Attach additional shed	ig additi ets, if nec	onal Articles, enter change(s) here: cessary). (Be specific)		

		<del> </del>
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		· <del></del>
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<u> </u>		<del></del>
<del>-</del>		
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in the amendment itself:	
		<del>.</del>
		<del> </del>
	<del> </del>	
	Page 3 of 4	
	10/14/2019	
The date of each amendment(s) adoption:	10/1/2017	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : 10/14/2019		<u> </u>
	(no more than 90 days after amendment file date)	<del></del>

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amend	ment(s) ( <u>CHECK ONE</u> )
	) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ars was/were sufficient for approval.
	) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The numbe	er of votes cast for the amendment(s) was/were sufficient for approval
by	, u
0)	(voting group)
action was not rec	) was/were adopted by the incorporators without shareholder action and shareholder
	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	MIGUEL A MARTINEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)